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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	JAB 1278-PCT-USA
First Named Inventor	Stokbroekx, Raymond A.
<b>COMPLETE IF KNOWN</b>	
Application Number	09 / 446,591
Filing Date	December 21, 1999
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Angiogenesis inhibiting 5-substituted-1,2,4-thiadiazolyl derivatives

the specification of which

(Title of the Invention)

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 06/22/1998

as United States Application Number or PCT International

Application Number PCT/EP98/04022 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
97201931.9	EP	06/24/1997	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/053003	07/10/1997	

Page 1 of 4

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number  OR ☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Audley A. Ciamporcerro, Jr.		Michael Stark	32,495
Sfěvřh P. Berman	24,772	Ellen C. Coletti	34,140
Andrea L. Colby	30,194	Mary A. Appollina	34,087

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	Audley A. Ciamporcerro, Jr.				
Address	Johnson & Johnson				
Address	One Johnson & Johnson Plaza				
City	New Brunswick	State	NJ	ZIP	08933-7003
Country	USA	Telephone	(732) 524-2359	Fax	(732) 524-2808

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Raymond Antoine		Stokbroekx	
Inventor's Signature			Date
Residence: City	B-2340 Beerse	State	Country Belgium
Post Office Address	Rode Kruisstraat 17		
Post Office Address			
City	Beerse	State	ZIP B-2340
		Country	Belgium

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached h retc

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>4</u>
--------------------	--

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Marc André		Ceusters			
Inventor's Signature				Date	
Residence: City	B-3293 Diest	State		Country	Belgium
Post Office Address	Bredestraat 18				
Post Office Address					
City	Diest	State		ZIP	B-3293
				Country	Belgium
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Marcel Jozef Maria		Van der Aa			
Inventor's Signature				Date	
Residence: City	B-2300 Turnhout	State		Country	Belgium
Post Office Address	Patersstraat 155 bus 1				
Post Office Address					
City	Turnhout	State		ZIP	B-2300
				Country	Belgium
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Marcel Gerebernus Maria		Luyckx			
Inventor's Signature				Date	
Residence: City	B-2440 Geel	State		Country	Belgium
Post Office Address	Eksterstraat 24				
Post Office Address					
City	Geel	State		ZIP	B-2440
				Country	Belgium

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 4 of 4

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Marc				Willems			
Inventor's Signature				Date			
Residence: City	B-2350 Vosselaar	State		Country	Belgium	Citizenship	Belgium
Post Office Address	Merellaan 46						
Post Office Address							
City	Vosselaar	State		ZIP	B-2350	Country	Belgium
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Robert W.				Tuman			
Inventor's Signature	<i>Robert W. Tuman</i>			3/3/00		Date	
Residence: City	Chalfont	State	PA	Country	USA	Citizenship	USA
Post Office Address	103 Homestead Court						
Post Office Address							
City	Chalfont	State	PA	ZIP	18914	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	JAB 1278-PCT-USA
	First Named Inventor	Stokbroekx, Raymond A.
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	Application Number	09 / 446,591
	Filing Date	December 21, 1999
	Group Art Unit	
	Examiner Name	

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Angiogenesis inhibiting 5-substituted-1,2,4-thiadiazolyl derivatives

the specification of which  
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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

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☐ Customer Number  OR  
☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Audley A. Ciamporcerro, Jr.	26,051	Michael Stark	32,495
Steven P. Berman	24,772	Ellen C. Coletti	34,140
Andrea L. Colby	30,194	Mary A. Appollina	34,087

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Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

Name	Audley A. Ciamporcerro, Jr.				
Address	Johnson & Johnson				
Address	One Johnson & Johnson Plaza				
City	New Brunswick	State	NJ	ZIP	08933-7003
Country	USA	Telephone	(732) 524-2359	Fax	(732) 524-2808

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
Raymond Antoine	Stokbroekx

Inventor's Signature				Date	
Residence: City	B-2340 Beerse	State		Country	Belgium
Post Office Address	Rode Kruisstraat 17				
Post Office Address					
City	Beerse	State		ZIP	B-2340
				Country	Belgium

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>4</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Marc André				Ceusters			
Inventor's Signature						Date	29/3/2000
Residence: City	B-3293 Diest	State		Country	Belgium	Citizenship	Belgium
Post Office Address Bredestraat 18							
Post Office Address							
City	Diest	State		ZIP	B-3293	Country	Belgium
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle (if any))				Family Name or Surname			
Marcel Jozef Maria				Van der Aa			
Inventor's Signature						Date	29/3/2000
Residence: City	B-2300 Turnhout	State		Country	Belgium	Citizenship	Belgium
Post Office Address Patersstraat 155 bus 1							
Post Office Address							
City	Turnhout	State		ZIP	B-2300	Country	Belgium
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Given Name (first and middle (if any))				Family Name or Surname			
Marcel Gerebernus Maria				Luyckx			
Inventor's Signature						Date	29/3/2000
Residence: City	B-2440 Geel	State		Country	Belgium	Citizenship	Belgium
Post Office Address Eksterstraat 24							
Post Office Address							
City	Geel	State		ZIP	B-2440	Country	Belgium


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Given Name (first and middle [if any])				Family Name or Surname			
Marc				Willems			
Inventor's Signature						Date	29/3/2000
Residence: City	B-2350 Vosselaar	State		Country	Belgium	Citizenship	Belgium
Post Office Address	Merellaan 46						
Post Office Address							
City	Vosselaar	State		ZIP	B-2350	Country	Belgium
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Robert W.				Tuman			
Inventor's Signature						Date	
Residence: City	Chalfont	State	PA	Country	USA	Citizenship	USA
Post Office Address	103 Homestead Court						
Post Office Address							
City	Chalfont	State	PA	ZIP	18914	Country	USA
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Post Office Address							
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City		State		ZIP		Country	

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